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|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------|
| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10500636 | <b>Applicant(s)/Patent Under Reexamination</b><br>MASON, ANGELO |
|                                                                                                                 | <b>Examiner</b><br>JILA M MOHANDESI        | <b>Art Unit</b><br>3728                                         |

| ORIGINAL           |                                   |          |  |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                      |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|----------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |  |  |  | CLAIMED                      |   |   |   |                      | NON-CLAIMED |  |  |  |  |  |  |  |
| 36                 |                                   | 76R      |  |  |  | A                            | 4 | 3 | B | 13 / 18 (2008.01.01) |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| 36                 | 27                                | 103      |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final                                                                                                                                                                             | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1                                                                                                                                                                                 | 18       | 17    | 34       |       |          |       |          |       |          |       |          |       |          |       |          |
| 2                                                                                                                                                                                 | 19       | 18    | 35       |       |          |       |          |       |          |       |          |       |          |       |          |
| 3                                                                                                                                                                                 | 20       | 19    | 36       |       |          |       |          |       |          |       |          |       |          |       |          |
| 4                                                                                                                                                                                 | 21       | 20    | 37       |       |          |       |          |       |          |       |          |       |          |       |          |
| 5                                                                                                                                                                                 | 22       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 6                                                                                                                                                                                 | 23       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 7                                                                                                                                                                                 | 24       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 8                                                                                                                                                                                 | 25       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 9                                                                                                                                                                                 | 26       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 10                                                                                                                                                                                | 27       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 11                                                                                                                                                                                | 28       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 12                                                                                                                                                                                | 29       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 13                                                                                                                                                                                | 30       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 14                                                                                                                                                                                | 31       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 15                                                                                                                                                                                | 32       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 16                                                                                                                                                                                | 33       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

|                                                                                                    |                              |                              |                        |
|----------------------------------------------------------------------------------------------------|------------------------------|------------------------------|------------------------|
| NONE                                                                                               |                              | <b>Total Claims Allowed:</b> |                        |
|                                                                                                    |                              | 20                           |                        |
| (Assistant Examiner)<br>/JILA M MOHANDESI/<br>Primary Examiner Art Unit 3728<br>(Primary Examiner) | (Date)<br>11/03/08<br>(Date) | O.G. Print Claim(s)<br>1     | O.G. Print Figure<br>6 |